

Bambi Faivre Walters, PC
PO Box 5743
Williamsburg, VA 23188

RECEIVED
CENTRAL FAX CENTER
AUG 29 2004

To: Art Unit 2134 703-872-9306
ATTN: Christopher J. Brown Fax:

From: Bambi Walters Date: 8/29/2004

Re: (1) Transmittal; Pages: 13
(2) Fee Transmittal & Credit
Card Payment Form; and
(3) IDS

Serial No. 09/608,184



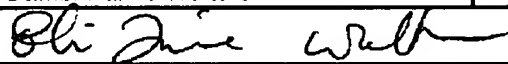
☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

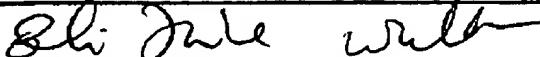
Please feel free to contact me should there be any problems with the transmission or if
you would like to discuss anything further.

Thank you, Bambi

757-253-5729 (Office)
757-784-1978 (Mobile)

RECEIVED
AUG 30 2004
OIE/JCWS

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/608,184	
	Filing Date	June 30, 2000	
	First Named Inventor	Samuel N. Zellner	
	Art Unit	2134	
	Examiner Name	Christopher J. Brown	
	Attorney Docket Number	BS99224	
Total Number of Pages in This Submission: 13			
ENCLOSURES (Check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):	
Remarks:			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Name (Print/Type)	Bambi Faivre Walters	Reg. No.:	45,197
Signature			
Date	August 29, 2004		

CERTIFICATE OF TRANSMISSION / MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, PO Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Name (Print/Type)	Bambi Faivre Walters	Date	August 29, 2004
Signature			

FEE TRANSMITTAL for FY 2003

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

\$180.00

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account

 Deposit
Account
No.

 Deposit
Account
Name

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	180	2005	80	Provisional filing fee	

SUBTOTAL (1):

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims - 20** = X 18.00 =

Independent Claims - 3** = X 88.00 =

Multiple Dependent =

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	88	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	88	2204	43	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent

**or number previously paid, if greater; For Reissues, see above

SUBTOTAL (2):

Complete if Known

Application Number 09/608,184

Filing Date June 30, 2000

First Named Inventor Samuel N. Zelnher

Examiner Name Christopher J. Brown

Art Unit 2134

Attorney Docket No. B699224

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Code	Fee (\$)	Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	850	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fees under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Info Disclosure Stmt	180.00
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify):

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3): \$180.00

SUBMITTED BY:

Name (Print/Type)

Bambi Falvra Walters

Registration No. (Attorney/Agent)

45,197

Complete (if applicable)

Telephone:

(757) 253-5729

Signature

Date

8/29/04

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Samuel N. Zellner **Group Art Unit:** 2134
Application No.: 09/608,184 **Examiner:** Christopher J. Brown
Filed: June 30, 2000
Title: "System and Method for Monitoring Commercial Transactions"

VIA FACSIMILE 703-872-9306

TC2100

Attn: Examiner Christopher J. Brown

37 C.F.R. § 1.8 CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on: 8/29/04 (date of transmission).

Bambi F. Walters

Name of Person Faxing This Paper

Bambi F. Walters

Signature

AUGUST 29, 2004

Date of Transmission

INFORMATION DISCLOSURE STATEMENT

Pursuant to 37 CFR §§1.56, 1.97, and 1.98, the attention of the Patent and Trademark Office is hereby directed to the two references listed on the attached Form PTO 1449 (page 2). A copy of the cited references is attached.

This Information Disclosure Statement is being submitted after the mailing of the first Office Action in this application and therefore, and a certification fee is being submitted as required under 37 CFR § 1.97b(3).

08/30/2004 JBALINAH 00000101 09608184

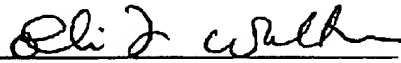
01 FC:1806

180.00 OP

IDS
09/608,184

It is respectfully requested that the references listed on the attached form be expressly considered by the Examiner and be made of record in the application and appear among the "References Cited" on any patent to issue therefrom. Some information identified in Form PTO 1449 is unknown by Assignee, such as, for example, name of author, city and/or country where published. Nevertheless, the Assignee has submitted all know information for these references and respectfully request consideration of these references.

Respectfully submitted,



Bambi F. Walters
Attorney for Applicants
Registration No. 45,197
P. O. Box 5743
Williamsburg, VA 23188
Telephone: 757.253.5729

Date: 8/29/04

Please type a plus sign (+) inside this box → ☐

PTO/SB/08A (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

Substitute for form 1449A/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(use as many sheets as necessary)

Sheet 2 of 2

Complete if Known

Application Number	09/608,184
Filing Date	June 30, 2000
First Named Inventor	Samuel N. Zellner
Group Art Unit	2134
Examiner Name	Christopher J. Brown
Attorney Docket Number	BS99224

OTHER PRIOR ART -- NON PATENT LITERATURE DOCUMENTS

Examiner Initials *	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
		"Discover Card Financial Services to Debut Three New Commercials," Morgan Stanley Pressroom (from www.morganstanley.com/cgi-bin/morganstanley.com/pressroom.cgi?action=load&uid=68), November 03, 1999, © 2002-2003, pages 1-2.	
		"E-mail Reminders," Discover Card (from www.discovercard.com/discover/data/account/disc_interactive.shtml), Discover is a Morgan Stanley Company, release date unknown, © 2004, pages 1-2.	

Examiner
SignatureDate
Considered

* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.